PART B - FEE(S) TRANSMITTAL

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TYPE SMALL ENTITY 05/12/2008 \$1740 \$300 \$1440 NO nonprovisional **CLASS-SUBCLASS EXAMINER** ART UNIT 1791 117-073000 MALEKZADEH, SEYED MASOUD Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Smith Patent Office 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to ☐ "Fee Address" indication (or "Fee Address" Indication form 2 registered patent attorneys or agents. If no name is listed, no name will be printed. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. 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